## APCD Analytic and Technical Workgroup:

Discussing challenges and opportunities for improving the standardization of Provider File data

January 24, 2011



### Introductions

- Betty Harney (Director of Data Enhancement and Standardization)
- Kathy Hines (Director of Data Compliance and Support)
- Marc Prettenhofer (Project Manager Senior Business Analyst)
- Paul Smith (APCD Liaison)
- Young Joo (Director of Data Strategies)
- Adam Tapply (Intern)



## Objectives for today's meeting

- Review specific uses of provider data
- Provide an overview of the APCD Provider File
- Discuss challenges with standardizing provider data and improving data quality for analysis
- Address questions from workgroup participants



# Uses of standardized APCD provider data to support robust analyses

- 1. DHCFP mandated reporting and analysis
  - Total Medical Expenses and Relative Prices





Commonwealth of Massachusetts

Deval L. Patrick Governor

Timothy P. Murray Lieutenant Governor

JudyAnn Bigby, M.D.
Secretary
Executive Office of Health
and Human Services

Seena Perumal Carrington Acting Commissioner Division of Health Care Finance and Policy

## Massachusetts Total Medical Expenses: 2009 Baseline Report

June 2011

## Massachusetts Total Medical Expenses: 2009 Baseline Report

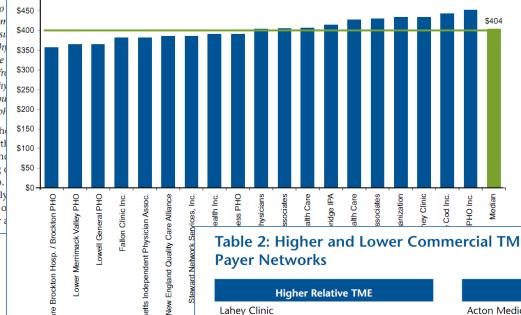
**Section 4: Physician Group Total Medical Expenses** 

Method: Physician groups were included in this analysis if they had at least 36,000 member months, the equivalent of 3,000 members, in managed care plans for a given payer over the reporting time period. Physician group reporting occurred at both the "parent" level and the "local" level. The "parent

physician group" refers to local practice groups. Son local practice groups; in si some cases, the parent phy group contracted with the data has been excluded fro dividing payer-specific phy adjusted TME for the grou relative TME for parent pl

Massachusetts Total Medical Expenses

This section explores the physician networks of th Pilgrim Health Care, an total medical spending with a particular group. does not, have relatively group TME to number o members across higher



2009 Baseline Report

### Table 2: Higher and Lower Commercial TME Parent Physician Groups Across **Payer Networks**

## Health Care Finance and Policy

#### **Higher Relative TME**

Lahey Clinic

Mount Auburn Cambridge IPA

Northeast PHO, Inc.

Partners Community Health Care

Physicians of Cape Cod

South Shore Physicians Hospital Organization

Sturdy Memorial Hospital and Associates

U Mass Memorial Health Care

#### **Lower Relative TME**

Acton Medical Associates\*

Baycare Health Partners Inc.\*

Boston Medical Center Management Services\*

Fallon Clinic Inc.

HealthAlliance with Physicians\*

Lower Merrimack Valley PHO

Lowell General PHO

New England Quality Care Alliance\*

Steward Network Services, Inc.\*

# Uses of standardized APCD provider data to support robust analyses

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- 2. Sister agencies: to facilitate administrative simplification
  - Patient-Centered Medical Home Initiative (PCMHI) utilization and efficiency reporting to providers
  - Health Care Quality and Cost Council's My Health Care Options website



### MyHealthCareOptions\*



For Patients & Families

About The Ratings

Frequently Aisked Questions

Resources & Tools

Albout Us

Feedback

### □ Comparison of Providers



Bookmark

#### Choose a Topic

#### Patient Safety

Influenza Vaccination Patient Safety Serious Reportable Events Surgical Care

### Patient Experience

Patient Experience

#### Bone and Joint Care

Back Procedure Hip Fracture

Hip Replacement

Knee Replacement

#### Cardiovascular Disease

Angioplasty. Bypass Surgery Cardiac Screening Tests Heart Attack Heart Failure Heart Valve Surgery Stroke

#### Digestive System

Gall Bladder Intestinal Surgery Weight Joss Surgery

### Hip Replacement

People with severe arthritis or other hip problems may choose to have hip replacement surgery. This is when doctors replace the damaged hip with a prosthetic (artificial or mechanical) one. (more)

Diagnostic classification: Hip Replacement (A PR-DRG 301)

Summarized Report

ViewDetailed Report

ViewStatewide Procedure Costs

Marest Aubrers Upperital House England Dontiet Upperital

### Quality of Care

(more)

	Mount Auburn Hospital	New England Baptist Hospital
Quality Rating	**	☆☆
Statistical Significance	Not Different from State Average Quality	Not Different from State Average Quality
Cost of Care more)		
	Mount Auburn Hospital	New England Baptist Hospital
Cost Rating	\$	\$\$\$
Statistical Significance	Below Median State Cost	Above Median State Cost

Heart Failure Heart Valve Surgery Stroke

### Digestive System

Gall Bladder Intestinal Surgery Weight-loss Surgery

### Obstetrics

Cesarean Section Normal Newborn Ultrasound Vaginal Delivery

### **Outpatient Diagnostic**

CT Scan MRI X-Ray

### Outpatient Radiation

Radiation Treatment

### Respiratory

COPD

Pneumonia

### Women's Health

Mammogram

### Cost of Care

Note: Because the numbers shown below were rounded for this report, the values may appear inconsistent with the dollar sign ranking. For more information, click here: (more)

	Mount Auburn Hospital	New England Baptist Hospital	State Wide
Cost Rating	\$	555	
Statistical Significance	Below Median State Cost	Above Median State Cost	
High Cost	\$22,000	\$25,500	\$26,500
Median Cost	\$18,500	\$25,000	\$22,000
Low Cost	\$17,000	\$16,500	\$16,000

Data Provided by Health Care Quality and Cost Council. (HCQCC) [7/1/2008 - 6/30/2009 with claims paid through 12/31/2009].

### Number and Severity of Cases

(more)

	Mount Auburn Hospital	New England Baptist Hospital	State Wide
Number of Patients	187	2010	10399
Percentage of patients whose severity of illness was major or extreme (higher is more experience with complex patients)	7%	8%	13%
	NAME OF STREET	. 4 11 - 144   0   5 5	10000000 00000000000000000000000000000

Data Provided by Division of Health Care Finance and Policy [10/1/2008 - 9/30/2009]

### Quality of Care - State Legend



Below State Average Quality.

Not Different from State Average Quality.

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  - Health Care Quality and Cost Council's My Health Care Options website
- 3. External users
  - Massachusetts Health Quality Partners' (MHQP) Annual Clinical Quality in Primary Care





home qu

quality reports

quidelines

collaboration

about us



#### clinical quality

medical group

key findings

q&a

helpful resources

technical appendix

disclaimer

acknowledgements

letters of support

patient experiences

hospital quality

Sign Up for MHQP's Email List

Enter Your Email:

Join



### QUALITY INSIGHTS: CLINICAL QUALITY IN PRIMARY CARE

Begin By Selecting Massachusetts Medical Groups...



### By distance from a particular zip code:

Find medical groups within

5 miles 💌 of zip code:



Search



### By name of a medical group:

Enter medical group name:

		n
	``	-0.
		-

Search



### By name of a doctors' office:

Enter doctors' office name:



Search

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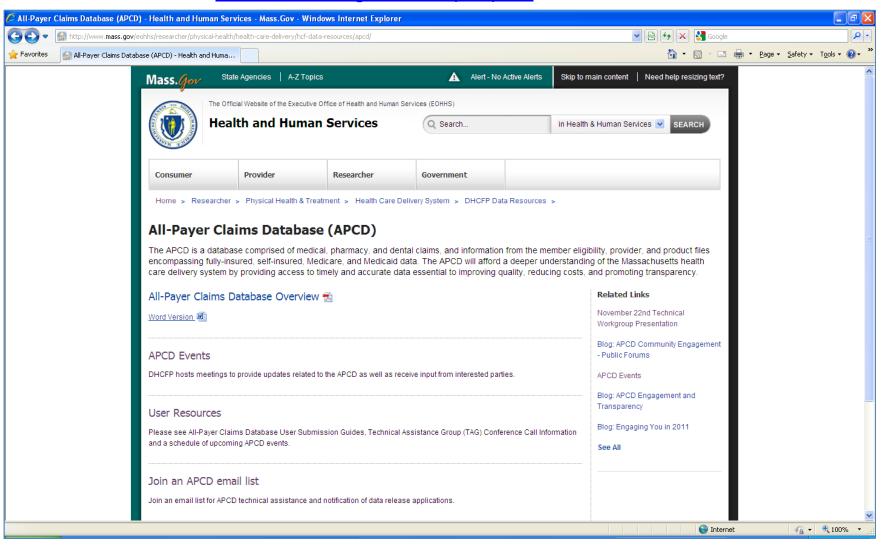
### 3. External users

- Massachusetts Health Quality Partners' (MHQP) Annual Clinical Quality in Primary Care
- Build episodes-of-care (ETGs) to measure and compare the clinical and financial performance of network physicians and other health care providers
- What other uses and benefits do researchers, employers, payers, providers, and other stakeholders anticipate from the provider file?

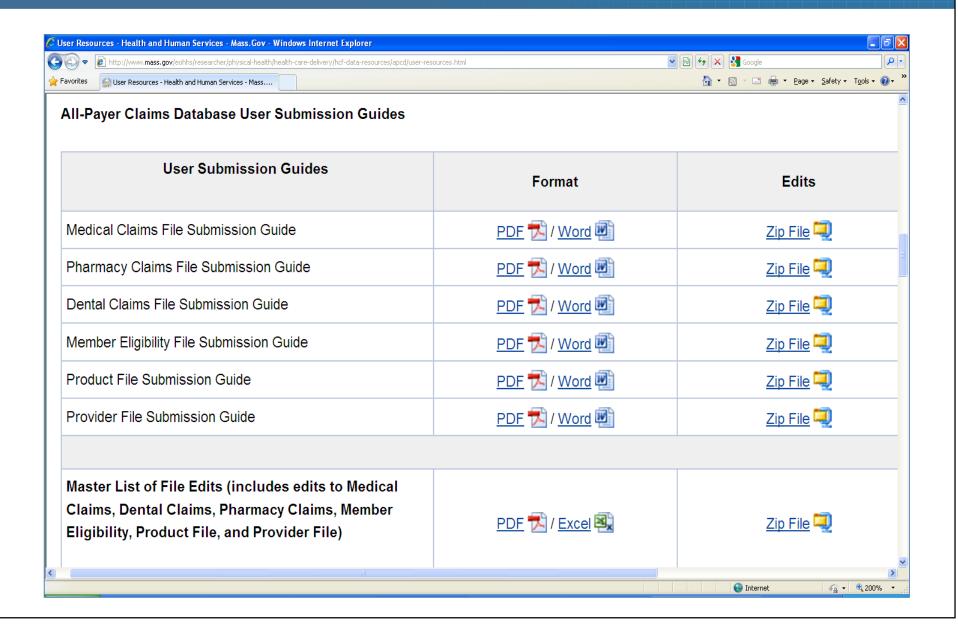


### **APCD** Website

### APCD Website - www.mass.gov/dhcfp/apcd



### APCD User Resources



# APCD Provider File (PV) includes a number of fields to identify providers

### Demographics

- First Name, Last Name, Middle Initial, Suffix
- Street Address, City, State, Zip Code

### Dates

Start/end date and Provider affiliation start/end date

### Provider Specialty

- Taxonomy, Provider Type Code, Primary Specialty Code

### Provider ID (PV002)

- The unique number for every service provider (persons, facilities or other entities involved in claims transactions) that a carrier has in its system
- This field may or may not be the provider NPI
- This field is used to uniquely identify a provider and that provider's affiliation and a provider and a provider's practice location within the provider file

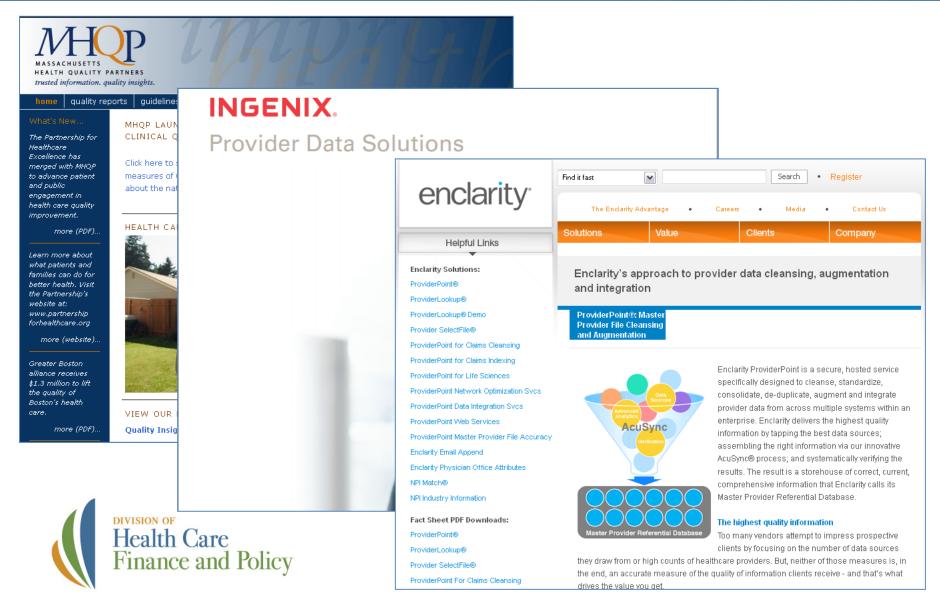


# Some identifiers are not always reliable for standardizing providers

- National Provider Identification (NPI)
  - Unique identification number for covered health care providers but a single provider may have more than one registered NPI
- Tax IDs
- Social Security Numbers



# Various tools are available for cleansing, augmentation, and integration of provider data



# Challenges with standardizing provider data across payers

- Incomplete or incorrect data values
  - APCD implements intake edits, thresholds, and variances
- Inconsistent data formats
  - Example: Cardiology vs. Cardiologist
  - Examples: Two Boylston Street vs. 2 Boylston St. vs. 2 Boylston Street, # 5
- Dynamic provider information
  - National Provider Identification (NPI) matching
  - Deceased providers
- Provider affiliations are complex
  - Affiliations for providers vary by carrier



# Challenges with standardizing provider data across payers

### Payer #1

First Name:

Jon

Last Name:

**Smith** 

Suffix:

Sr

Milton Pediatric Associates

### Payer #2

First Name:

Jon

Last Name:

**Smith** 

Suffix:

Jr

Milton Pediatric Associates

### Payer #3

First Name:

Jonathan

Last Name:

**Smith** 

Suffix:

Null

**Milton Hospital** 



## Q&A session

- Open discussion
  - What other challenges have you encountered using provider data?
  - What lessons should the Massachusetts APCD learn from your prior experiences with standardizing provider data?
  - What tools should the APCD consider utilizing to enhance provider data?
  - What information from the Provider File is critical for DHCFP to include in an extract file?
- Questions from webinar participants
- Questions emailed to DHCFP (<a href="mailto:dhcfp.apcd@state.ma.us">dhcfp.apcd@state.ma.us</a>)



## APCD Workgroup Meetings and Events

Upcoming Schedule		
APCD Analytic Workgroup  3rd Tuesday of each month	Feb. 21 <sup>st</sup> @ 2pm EST	
APCD Technical Workgroup  4th Tuesday of each month	Feb. 28 <sup>th</sup> @ 2pm EST	
APCD Data Release Consultative Sessions	Friday, March 2 <sup>nd</sup> @ 9am EST Wednesday, March 7 <sup>th</sup> @ 2pm EST	

For meeting materials and information, please visit:

www.mass.gov/dhcfp/apcd

